

6024

<b>U.S. Postal Service</b>	
<b>CERTIFIED MAIL RECEIPT</b>	
(Domestic Mail Only; No Insurance Coverage Provided)	
7/22/02 7099 3400 0016 8895 6658	
7/22/02 7099 3400 0016 8895 6658	
Postage	\$ 3.95
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 9.00
UNIT ID: 0022	Postmark Here
Clerk: KFM042	07/22/02
Recipient's Name (Please Print Clearly (to be completed by mailer))	
JAY MARSHALL	
Street, Apt. No., or PO Box No.	
P O BOX 986	
City, State, ZIP+4	
PRICE UT 84501	
PS Form 3811, July 1999	

<b>SENDER: COMPLETE THIS SECTION</b>	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	
1. Article Addressed to:	
JAY MARSHALL UTAH AMERICAN ENERGY INC P O BOX 986 PRICE UT 84501	
2. Article Number (Copy from service label)	
7099 3400 0016 8895 6658	
PS Form 3811, July 1999	
<b>COMPLETE THIS SECTION</b>	
A. Received by (Please Print Name)	
C. Signature	
X <i>[Signature]</i>	
D. Is copy address? If yes, enter deliver	
3. Service Type	
<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail	
4. Restricted Delivery	